



March 15, 2012

Ms. Wilhemina McLemore
Supervisor, Detroit Field Office
MDEQ, Air Quality Division
Cadillac Place, Suite 2-300
3058 West Grand Boulevard
Detroit, Michigan 48202-6058

Subject: Severstal Dearborn, LLC – Annual ROP Certification

Dear Ms. McLemore:

Attached is our annual ROP certification and semi-annual deviation reports for 2011.

Should you need additional information or wish to discuss this matter further, please contact me at (313) 845-3217.

Very truly yours,

A handwritten signature in black ink, appearing to read "J. Earl".

James E. Earl, Manager
Environmental Engineering

Attachments:

ROP Certification
January 1 – June 30, 2011 Deviation Report
July 1 – December 31, 2011 Deviation Report

cc: USEPA, Region 5

Severstal Dearborn
14661 Rotunda Drive
P. O. Box 1699
Dearborn, MI 48120-1699

T: (313) 845-3217
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MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
AIR QUALITY DIVISION

**RENEWABLE OPERATING PERMIT
REPORT CERTIFICATION**

Authorized by 1994 P.A. 451, as amended. Failure to provide this information may result in civil and/or criminal penalties.

Reports submitted pursuant to R 336.1213 (Rule 213), subrules (3)(c) and/or (4)(c), of Michigan's Renewable Operating Permit (ROP) program must be certified by a responsible official. Additional information regarding the reports and documentation listed below must be kept on file for at least 5 years, as specified in Rule 213(3)(b)(ii), and be made available to the Department of Environmental Quality, Air Quality Division upon request.

Source Name Severstal Dearborn, LLC County Wayne
Source Address 4001 Miller Road City Dearborn
AQD Source ID (SRN) A8640 ROP No. 199700004 ROP Section No. 1

Please check the appropriate box(es):

☒ **Annual Compliance Certification (Pursuant to Rule 213(4)(c))**

Reporting period (provide inclusive dates): From 1/1/2011 To 12/31/2011

- ☐ 1. During the entire reporting period, this source was in compliance with **ALL** terms and conditions contained in the ROP, each term and condition of which is identified and included by this reference. The method(s) used to determine compliance is/are the method(s) specified in the ROP.
- ☒ 2. During the entire reporting period this source was in compliance with all terms and conditions contained in the ROP, each term and condition of which is identified and included by this reference, **EXCEPT** for the deviations identified on the enclosed deviation report(s). The method used to determine compliance for each term and condition is the method specified in the ROP, unless otherwise indicated and described on the enclosed deviation report(s).

☒ **Semi-Annual (or More Frequent) Report Certification (Pursuant to Rule 213(3)(c))**

Reporting period (provide inclusive dates): From 07/01/2011 To 12/31/2011

- ☐ 1. During the entire reporting period, **ALL** monitoring and associated recordkeeping requirements in the ROP were met and no deviations from these requirements or any other terms or conditions occurred.
- ☒ 2. During the entire reporting period, all monitoring and associated recordkeeping requirements in the ROP were met and no deviations from these requirements or any other terms or conditions occurred, **EXCEPT** for the deviations identified on the enclosed deviation report(s).

☐ **Other Report Certification**

Reporting period (provide inclusive dates): From _____ To _____
Additional monitoring reports or other applicable documents required by the ROP are attached as described:

I certify that, based on information and belief formed after reasonable inquiry, the statements and information in this report and the supporting enclosures are true, accurate and complete

Bruce L. Black

Name of Responsible Official (print or type)

V. P. and General Manager

Title

(313) 317-8955

Phone Number

Bruce L. Black
Signature of Responsible Official

3/12/12
Date



MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
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**RENEWABLE OPERATING PERMIT
DEVIATION REPORT**

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This form may be submitted in conjunction with the Renewable Operating Permit Report Certification form (EQP 5736) to report deviations from all general conditions and special conditions in the Renewable Operating Permit (ROP) for which deviations required to be reported by R 336.1213 (Rule 213) subrule (3)(c) have occurred. Additional information regarding the reports and documentation listed below must be kept on file for at least 5 years, as specified in Rule 213(3)(b)(ii), and be made available to the Department of Environmental Quality, Air Quality Division, upon request. Items 1 - 8 must be completed for all deviations being reported.

Source Name Severstal Dearborn, LLC County Wayne
Source Address 4001 Miller Road City Dearborn
AQD Source ID (SRN) A8640 ROP No. 199700004 ROP Section No. 1
ROP Section Contact James E. Earl Contact Phone No. (313) 845-3217
Reporting Period (provide inclusive dates): From 07/01/11 to 12/31/11

1. Group or Source Wide ID FGB&CCASTHOUSE	2. Condition No. III.A.3.1	3. Date(s) of Occurrence 07/01/11-12/31/11	4. Previously reported ? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	5. Duration of Deviation 6 monthly calculations
6. Method Used to Determine Compliance Status (if different from method specified in ROP)			7. Description of Deviation Did not calculate PM-10, manganese, arsenic, and chromium VI emissions by the end of each calendar month from the casthouses.	
8. Reason for Deviation and Description of Corrective Action Taken The calculations for these emissions no longer apply since Permit 182-05B imposes updated calculations. Permit 182-05B conditions are included in the proposed renewal ROP.				

1. Group or Source Wide ID EGRAWMATERIALHANDLING	2. Condition No. III.A.2.1	3. Date(s) of Occurrence 07/01/11-12/31/11	4. Previously reported ? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Date	5. Duration of Deviation 26 readings
6. Method Used to Determine Compliance Status (if different from method specified in ROP)			7. Description of Deviation Pressure drop across baghouse was not between 5 and 8 inches w.c. and no appropriate maintenance activity was initiated.	
8. Reason for Deviation and Description of Corrective Action Taken This deviation was voluntary disclosed as an environmental audit finding on March 12, 2009. Normal baghouse differential pressure is less than 5 inches. As allowed in the ROP, a letter to the District supervisor was sent on March 20, 2009 to request a change to the pressure drop range to between 2 and 6 inches w.c. This revised range is in the proposed renewal ROP.				

1. Group or Source Wide ID EGBOF	2. Condition No. II.B.2	3. Date(s) of Occurrence 7/4/2011	4. Previously reported ? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 7/18/11	5. Duration of Deviation 3 minutes
6. Method Used to Determine Compliance Status (if different from method specified in ROP)			7. Description of Deviation Three minute opacity average was 35% from the BOF Roof Monitors. See our 7/18/11 letter to the MDEQ for details.	
8. Reason for Deviation and Description of Corrective Action Taken Due to an eruption during an oxygen blow on "B" vessel. Next reading on 7/12/2012 was below 20% opacity.				



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ROP Section Contact James E. Earl Contact Phone No. (313) 845-3217
Reporting Period (provide inclusive dates): From 07/01/11 to 12/31/11
Report Type: ☐ Annual ☒ Semi Annual ☐ Other (Describe) _____

1. Group or Source Wide ID EGN01LRP	2. Condition No. III.A.3.2	3. Date(s) of Occurrence July, October, December	4. Previously reported ? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Date	5. Duration of Deviation 3 monthly inspections
6. Method Used to Determine Compliance Status (if different from method specified in ROP)		7. Description of Deviation Records of monthly inspection to determine operational and physical condition of baghouse are not available.		
8. Reason for Deviation and Description of Corrective Action Taken Implementing an electronic retention of all baghouse inspections through scanning and uploading to a shared server.				

1. Group or Source Wide ID EGCBFBLEEDERS	2. Condition No. II.B	3. Date(s) of Occurrence 8/10/11	4. Previously reported ? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Date 9/9/11	5. Duration of Deviation 13 minutes
6. Method Used to Determine Compliance Status (if different from method specified in ROP)		7. Description of Deviation The highest 6 minute average opacity was 55% from the C BF Bleeders. See our 9/9/11 letter to the MDEQ for details.		
8. Reason for Deviation and Description of Corrective Action Taken Occurred during shutdown of furnace. Revised written shutdown procedure regarding taphole plugging.				

1. Group or Source Wide ID General Condition	2. Condition No. 2.a	3. Date(s) of Occurrence 8/10/11	4. Previously reported ? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Date 9/9/11	5. Duration of Deviation 9 minutes
6. Method Used to Determine Compliance Status (if different from method specified in ROP)		7. Description of Deviation The highest 6 minute average opacity was 40% from the C BF stove stack. See our 9/9/11 letter to the MDEQ for details.		
8. Reason for Deviation and Description of Corrective Action Taken Occurred during shutdown of furnace. Revised written shutdown procedure regarding aspiration valve function.				



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ROP Section Contact James E. Earl Contact Phone No. (313) 845-3217
Reporting Period (provide inclusive dates): From 07/01/11 to 12/31/11
Report Type: ☐ Annual ☒ Semi Annual ☐ Other (Describe) _____

1. Group or Source Wide ID EGBOF	2. Condition No. III.A.3.7	3. Date(s) of Occurrence July - December	4. Previously reported ? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Date	5. Duration of Deviation 184 days
6. Method Used to Determine Compliance Status (if different from method specified in ROP)		7. Description of Deviation Do not have 6 minute opacity averages records for 5 years.		
8. Reason for Deviation and Description of Corrective Action Taken Current data log system holds data for about 1 year. Will start downloading 6 minute averages and saving them in an Excel format on a periodic basis.				

1. Group or Source Wide ID General Condition	2. Condition No. 2.a	3. Date(s) of Occurrence 10/22/11	4. Previously reported ? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Date	5. Duration of Deviation Intermittent during 14.5 hours
6. Method Used to Determine Compliance Status (if different from method specified in ROP)		7. Description of Deviation ESP stack 6 minute average opacity may have been greater than 20% based on inadvertent deactivation of ESP rapper function.		
8. Reason for Deviation and Description of Corrective Action Taken Rapper program inadvertently in idle mode. Removed this mode from program.				

1. Group or Source Wide ID EGDESULFURIZATION	2. Condition No. III.A.3.10	3. Date(s) of Occurrence July, August, September	4. Previously reported ? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Date	5. Duration of Deviation 3 monthly inspections
6. Method Used to Determine Compliance Status (if different from method specified in ROP)		7. Description of Deviation Records of monthly visual checks of bag tension are not available.		
8. Reason for Deviation and Description of Corrective Action Taken Implementing an electronic retention of all baghouse inspections through scanning and uploading to a shared server.				



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ROP Section Contact James E. Earl Contact Phone No. (313) 845-3217
Reporting Period (provide inclusive dates): From 07/01/11 to 12/31/11
Report Type: ☐ Annual ☒ Semi Annual ☐ Other (Describe) _____

1. Group or Source Wide ID EGDESULFURIZATION	2. Condition No. III.A.3.13	3. Date(s) of Occurrence July - September	4. Previously reported ? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Date	5. Duration of Deviation 1 quarterly inspection
6. Method Used to Determine Compliance Status (if different from method specified in ROP)			7. Description of Deviation Records of quarterly inspection to confirm physical integrity of baghouse are not available.	
8. Reason for Deviation and Description of Corrective Action Taken Implementing an electronic retention of all baghouse inspections through scanning and uploading to a shared server.				

1. Group or Source Wide ID EGLADLEREFINE2	2. Condition No. III.A.3.2	3. Date(s) of Occurrence July	4. Previously reported ? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Date	5. Duration of Deviation 1 monthly inspection
6. Method Used to Determine Compliance Status (if different from method specified in ROP)			7. Description of Deviation Records of monthly inspection to determine operational and physical condition of baghouse are not available.	
8. Reason for Deviation and Description of Corrective Action Taken Implementing an electronic retention of all baghouse inspections through scanning and uploading to a shared server.				

1. Group or Source Wide ID EGDESULFURIZATION	2. Condition No. III.B.3.5	3. Date(s) of Occurrence July - December	4. Previously reported ? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Date	5. Duration of Deviation Unknown
6. Method Used to Determine Compliance Status (if different from method specified in ROP)			7. Description of Deviation Records of time corrective action was initiated, the corrective action taken, and the date when corrective actions were completed in response to a bag leak detection system alarm are not available.	
8. Reason for Deviation and Description of Corrective Action Taken Key operating personnel have been reinstructed on the importance of meeting all recordkeeping requirements.				



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Please check the appropriate box(es):

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☒ **Semi-Annual (or More Frequent) Report Certification (Pursuant to Rule 213(3)(c))**

Reporting period (provide inclusive dates): From 01/01/11 To 06/30/11

- ☐ 1. During the entire reporting period, **ALL** monitoring and associated recordkeeping requirements in the ROP were met and no deviations from these requirements or any other terms or conditions occurred.
- ☒ 2. During the entire reporting period, all monitoring and associated recordkeeping requirements in the ROP were met and no deviations from these requirements or any other terms or conditions occurred, **EXCEPT** for the deviations identified on the enclosed deviation report(s).

☐ **Other Report Certification**

Reporting period (provide inclusive dates): From _____ To _____
Additional monitoring reports or other applicable documents required by the ROP are attached as described:

I certify that, based on information and belief formed after reasonable inquiry, the statements and information in this report and the supporting enclosures are true, accurate and complete

Bruce L. Black V. P. and General Manager (313) 317-8955
Name of Responsible Official (print or type) Title Phone Number

B. L. Black 9/15/11
Signature of Responsible Official Date



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ROP Section Contact James E. Earl Contact Phone No. (313) 845-3217
Reporting Period (provide inclusive dates): From 01/01/11 to 6/30/11

1. Group or Source Wide ID FGB&CCASTHOUSE	2. Condition No. III.A.3.1	3. Date(s) of Occurrence 01/01-06/30/11	4. Previously reported ? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	5. Duration of Deviation 6 monthly calculations
6. Method Used to Determine Compliance Status (if different from method specified in ROP)		7. Description of Deviation Did not calculate PM-10, manganese, arsenic, and chromium VI emissions by the end of each calendar month from the casthouses.		
8. Reason for Deviation and Description of Corrective Action Taken The calculations for these emissions no longer apply since Permit 182-05B has newer calculations. Permit 182-05B conditions were included in the most recent ROP application.				

1. Group or Source Wide ID EGRAWMATERIALHANDLING	2. Condition No. III.A.2.1	3. Date(s) of Occurrence 1/1/11-6/30/11	4. Previously reported ? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Date	5. Duration of Deviation 26 readings
6. Method Used to Determine Compliance Status (if different from method specified in ROP)		7. Description of Deviation Pressure drop across baghouse was not between 5 and 8 inches w.c. and no appropriate maintenance activity was initiated.		
8. Reason for Deviation and Description of Corrective Action Taken This deviation was voluntary disclosed as an environmental audit finding on March 12, 2009. Normal baghouse differential pressure is less than 5 inches. As allowed in the ROP, a letter to the District supervisor was sent on March 20, 2009 to request a change to the pressure drop range to between 2 and 6 inches w.c.				

1. Group or Source Wide ID EGCBFCASTHOUSE	2. Condition No. II.B.1	3. Date(s) of Occurrence 4/11/11	4. Previously reported ? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	5. Duration of Deviation 6 minutes
6. Method Used to Determine Compliance Status (if different from method specified in ROP)		7. Description of Deviation The highest six minute opacity average was 21% from the C BF Roof.		
8. Reason for Deviation and Description of Corrective Action Taken A sudden blow at the end of a cast and clay in trough during plugging caused the exceedance. Taphole was reamed after cast.				



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ROP Section Contact James E. Earl Contact Phone No. (313) 845-3217
Reporting Period (provide inclusive dates): From 01/01/11 to 6/30/11
Report Type: ☐ Annual ☒ Semi Annual ☐ Other (Describe) _____

1. Group or Source Wide ID EGBOF	2. Condition No. II.B.2	3. Date(s) of Occurrence 1/3/11	4. Previously reported ? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Date	5. Duration of Deviation 3 minutes
6. Method Used to Determine Compliance Status (if different from method specified in ROP)		7. Description of Deviation Three minute opacity average was 30% from the BOF Roof Monitors.		
8. Reason for Deviation and Description of Corrective Action Taken Occurred during charging hot metal to "B" vessel. No root cause was determined. The 1/5/11 reading was below 20% opacity.				

1. Group or Source Wide ID EGBOF	2. Condition No. II.B.2	3. Date(s) of Occurrence 3/28/11	4. Previously reported ? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Date	5. Duration of Deviation 3 minutes
6. Method Used to Determine Compliance Status (if different from method specified in ROP)		7. Description of Deviation Three minute opacity average was 34% from the BOF Roof Monitors.		
8. Reason for Deviation and Description of Corrective Action Taken Addition of supplemental kicker after tapping caused emissions exceedance. BOF operations issued a memo on 4/15/11 re-instructing all operators to keep ladle under capture hood until emissions have diminished. The 3/30/11 reading was below 20% opacity.				

1. Group or Source Wide ID EGBOF	2. Condition No. II.B.2	3. Date(s) of Occurrence 4/13/11	4. Previously reported ? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Date	5. Duration of Deviation 3 minutes
6. Method Used to Determine Compliance Status (if different from method specified in ROP)		7. Description of Deviation Three minute opacity average was 37% from the BOF Roof Monitors.		
8. Reason for Deviation and Description of Corrective Action Taken Emissions caused by not enough freeboard in iron ladle at the desulfurization station. Desulfurization operators were instructed to skim iron in slag pot to provide sufficient freeboard. The 4/21/11 reading was below 20% opacity.				



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ROP Section Contact James E. Earl Contact Phone No. (313) 845-3217
Reporting Period (provide inclusive dates): From 01/01/11 to 06/30/11
Report Type: ☐ Annual ☒ Semi Annual ☐ Other (Describe) _____

1. Group or Source Wide ID EGBOF	2. Condition No. II.B.2	3. Date(s) of Occurrence 5/24/11	4. Previously reported ? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Date	5. Duration of Deviation 3 minutes
6. Method Used to Determine Compliance Status (if different from method specified in ROP)		7. Description of Deviation Three minute opacity average was 51% from the BOF Roof Monitors.		
8. Reason for Deviation and Description of Corrective Action Taken At the start of the oxygen blow on B Vessel, the exhaust dampers did not open 100%. The computer system was modified to prevent the start of oxygen flow until the dampers are open 100%. The 6/1/11 reading was below 20% opacity.				

1. Group or Source Wide ID EGBOF	2. Condition No. II.B.2	3. Date(s) of Occurrence 6/28/11	4. Previously reported ? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Date	5. Duration of Deviation 3 minutes
6. Method Used to Determine Compliance Status (if different from method specified in ROP)		7. Description of Deviation Three minute opacity average was 33% from the BOF Roof Monitors.		
8. Reason for Deviation and Description of Corrective Action Taken The addition of the supplemental kicker after tapping caused excess emissions. The operators were instructed to keep the ladle under the capture hood until emissions have diminished.				

1. Group or Source Wide ID General Condition	2. Condition No. 2.a	3. Date(s) of Occurrence 4/13/11	4. Previously reported ? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Date 5/19/11	5. Duration of Deviation 6 minutes
6. Method Used to Determine Compliance Status (if different from method specified in ROP)		7. Description of Deviation The highest six minute opacity average was 30% from the BOF "B" Vessel. See our 5/19/11 letter to the MDEQ for details.		
8. Reason for Deviation and Description of Corrective Action Taken An explosion door leaking on B Vessel. The inspection sheet from 4/13/11 determined there were leaking cracks and a concrete fill attempt had occurred. However, due to excess moisture from rain, the concrete did not set properly.				



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ROP Section Contact James E. Earl Contact Phone No. (313) 845-3217
Reporting Period (provide inclusive dates): From 01/01/11 to 06/30/11
Report Type: ☐ Annual ☒ Semi Annual ☐ Other (Describe) _____

1. Group or Source Wide ID EGBOF	2. Condition No. III.A.2.2 III.A.3.5b III.B.3.9	3. Date(s) of Occurrence 4/14/11 - 4/21/11	4. Previously reported ? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Date 4/29/11 and 7/27/11	5. Duration of Deviation 187 hours
6. Method Used to Determine Compliance Status (if different from method specified in ROP)			7. Description of Deviation Loss of archived ESP opacity data. See our 4/29/11 and 7/27/11 letters to the MDEQ for details.	
8. Reason for Deviation and Description of Corrective Action Taken Opacity records were lost when a server failed. Corrective actions include installing an additional backup server and downloading the COMS 1-hour block averages on a weekly basis.				

1. Group or Source Wide ID EGLADLEREFINE2	2. Condition No. III.A.3.14	3. Date(s) of Occurrence January - March	4. Previously reported ? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Date	5. Duration of Deviation 1 quarterly inspection
6. Method Used to Determine Compliance Status (if different from method specified in ROP)			7. Description of Deviation Did not adequately perform quarterly inspection to determine physical integrity of baghouse.	
8. Reason for Deviation and Description of Corrective Action Taken A change in operational schedule did not allow for shutdown to perform the inspection. Baghouse was inspected in the Second Quarter.				

1. Group or Source Wide ID EGLADLEREFINE2	2. Condition No. III.A.3.2	3. Date(s) of Occurrence January - May	4. Previously reported ? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Date	5. Duration of Deviation 5 monthly inspections
6. Method Used to Determine Compliance Status (if different from method specified in ROP)			7. Description of Deviation Did not perform monthly inspection to determine the operational and physical condition of baghouse.	
8. Reason for Deviation and Description of Corrective Action Taken A change in operational schedule did not allow for monthly shutdown to perform the inspection. Baghouse was inspected June 2011.				



MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
AIR QUALITY DIVISION

**RENEWABLE OPERATING PERMIT
DEVIATION REPORT**

Authorized by 1994 P.A. 451, as amended. Failure to provide this information may result in civil and/or criminal penalties.

This form may be submitted in conjunction with the Renewable Operating Permit Report Certification form (EQP 5736) to report deviations from all general conditions and special conditions in the Renewable Operating Permit (ROP) for which deviations required to be reported by R 336.1213 (Rule 213) subrule (3)(c) have occurred. Additional information regarding the reports and documentation listed below must be kept on file for at least 5 years, as specified in Rule 213(3)(b)(ii), and be made available to the Department of Environmental Quality, Air Quality Division, upon request. Items 1 - 8 must be completed for all deviations being reported.

Source Name Severstal Dearborn, LLC County Wayne
Source Address 4001 Miller Road City Dearborn
AQD Source ID (SRN) A8640 ROP No. 199700004 ROP Section No. 1
ROP Section Contact James E. Earl Contact Phone No. (313) 845-3217
Reporting Period (provide inclusive dates): From 01/01/11 to 06/30/11
Report Type: ☐ Annual ☒ Semi Annual ☐ Other (Describe) _____

1. Group or Source Wide ID EGN01LRF	2. Condition No. III.A.3.2	3. Date(s) of Occurrence January - June	4. Previously reported ? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Date	5. Duration of Deviation 6 monthly inspections
6. Method Used to Determine Compliance Status (if different from method specified in ROP)			7. Description of Deviation Did not perform monthly inspection to determine the operational and physical condition of baghouse.	
8. Reason for Deviation and Description of Corrective Action Taken A change in operational schedule did not allow for monthly shutdown to perform the inspection.				

1. Group or Source Wide ID EGN01LRF	2. Condition No. III.A.3.14	3. Date(s) of Occurrence January - June	4. Previously reported ? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Date	5. Duration of Deviation 2 quarterly inspections
6. Method Used to Determine Compliance Status (if different from method specified in ROP)			7. Description of Deviation Did not adequately perform quarterly inspection to determine physical integrity of baghouse.	
8. Reason for Deviation and Description of Corrective Action Taken A change in operational schedule did not allow for shutdown to perform the inspection.				

1. Group or Source Wide ID	2. Condition No.	3. Date(s) of Occurrence	4. Previously reported ? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Date	5. Duration of Deviation
6. Method Used to Determine Compliance Status (if different from method specified in ROP)			7. Description of Deviation	
8. Reason for Deviation and Description of Corrective Action Taken				